Good morning, Chairman Weisz, Lee, and members of the committee,

My name is McKenzie McCoy and I am for Watford City, ND. Among the many titles, I hold one, of them is Registered Nurse. I have been an RN for almost 20 years, and I have never seen the atrocities that have occurred and continue to occur over the COVID virus.

I believe that all life is precious. The right to life is the most important right we have, and as a nurse I took an oath to protect all life at every stage – womb to tomb. I also took an oath to do no harm, to provide complete informed consent in every situation, and advocate for the whole patient and their families. Never did I take an oath to disrespect patient wishes, to shame, blame or demonize a patient, or withhold treatment or deny care because a patient chooses an option that I might not personally agree with. Nor did I take an oath to withhold treatment or care because it doesn't fit the narrative of an insurance company, the FDA, or the CDC or any other governing body. I took an oath to SAVE LIVES.

In the last 18 months, I have been advocating for patients with COVID in collaboration with other medical professionals in various disciplines across the country using evidence-based medicine. We spend hours researching, reading, and analyzing studies and information to create or share protocols that are patient specific. But, we are being blocked from some of the safest, most vital and effective, not to mention low cost, treatment options for patients. Why? Because some treatments are not FDA or CDC approved specifically for COVID. I would safely bet that over half of the people in attendance today are taking a prescription medication for an off-label use. I myself take two medications for off-label use. Doctors and mid-level providers prescribe off-label use medications to their patients very frequently and have been doing it for decades. They prescribe these medications because they are safe and effective and change patient's lives. Why is treating COVID any different? Why are health care professionals being shamed, blamed, and demonized for using medicines and treatments that are WORKING? I shouldn't need to be here pleading for a law to be enacted so that medical professionals can continue to practice how we have been practicing for decades.

Our patients and their families choose all types of treatment options because as practitioners we layout ALL of the options for them. We need the ability and latitude to prescribe off-label drugs to successfully treat COVID. Early intervention and a multifaceted approach are key. Denying physicians, mid-level providers, nurses, and pharmacists the ability to provide safe, effective, low-cost alternatives for treatment is allowing people to die. In the last two weeks I have stood by and watched two patients pass away in the hospital because providers would not try alternative therapies. And their providers took all comfort measures away from these two patients because they refused the FDA/CDC approved drug and refused intubation. This cannot not continue. This is murder.

Please recommend a DO PASS on HB1514 and allow medical providers to continue practicing.

Thank you,

McKenzie McCoy, RN Watford City, ND